

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

James Froio

Mailing Address 142 Shaw Farm Road

City

Canyon

State

MA

Zip Code

02021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Froio Management Group,
Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: 90413.C1132

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00